

# FIRE DRILL REPORT

FOR

\_\_\_\_\_  
(ADDRESS)

A FIRE DRILL WAS COMPLETED AT THE ABOVE REFERENCED PROPERTY ON \_\_\_\_\_(date) IN ACCORDANCE WITH 2.8.3. OF THE ONTARIO FIRE CODE AND AS OUTLINED IN THE BUILDING'S FIRE SAFETY PLAN.

STAFF PRESENT: \_\_\_\_\_

OCCUPANTS PRESENT: \_\_\_\_\_

FIRE DRILL COMMENTS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DEFICIENCIES FOUND:

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
POSITION/TITLE

Note: Form to be returned to Cambridge Fire Dept. Fire Prevention Division